

United States Bankruptcy Court
61288, Houston TX 77208SOUTHERN DISTRICT OF TEXAS P.O.Box
(Houston Division)

PROOF OF CLAIM

Name of Debtors <input checked="" type="checkbox"/> Stage Stores, Inc., a Delaware corporation <input type="checkbox"/> Specialty Retailers, Inc., a Texas corporation <input type="checkbox"/> Specialty Retailers, Inc. (NV), a Nevada corporation *place an "x" beside the name of the Debtor you are filing a claim against		Case Number 00-35078-H2-11 00-35079-H2-11 00-35080-H2-11		Creditor ID#: 788-64115 United States Bankruptcy Court Southern District of Texas FILED JUL 11 2000 Michael N. Milby, Clerk
Name of Creditor (The person or other entity to whom the debtor owes money or property): WAFN-FM Wafa Fun Media Group, Inc.		Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.		
Name and address where notices should be sent: *****AUTO**ALL FOR AADC 350 Wafa Fun Media Group, Inc. PO Box 4184 Huntsville AL 35815-4184 [Barcode]		Check box if you have never received any notices from the bankruptcy court in this case Check box if the address differs from the address on the envelope sent to you by the court.		
Account or other number by which creditor identifies debtor: 18-13243/13421		Check here _____ replaces if this claim _____ amends a previously filed claim, dated: _____		
1. Basis for Claim <input type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages, salaries, and compensation (Fill out below) Your SS#: _____ Unpaid compensation for services performed from _____ (date) to _____ (date)		
2. Date debt was incurred: 4/11/2000 & 5/21/2000		3. If court judgment, date obtained:		
4. Total Amount of Claim at Time Case Filed: \$ 541.02 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.				
5. Secured Claim. <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other All personal and intangible property of Debtor's Estate Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____		6. Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)_____ *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.		
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		This Space Is for Court Use Only		
8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.				
9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.				
Date 7-3-2000	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): Susan E. McKenney Susan E. McKenney President			
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.				

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WAFN
FUN MEDIA GROUP/WAFN-FM
P.O. BOX 4184
HUNTSVILLE, AL 35815-4184
256-586-9300

Date : 04/11/2000
Customer/Invoice: 18-013243
Order Number : 18012
Length : 60 3
Salesperson : SUSAN MCKENNEY

STAGE
REYNOLDS MEDIA SERVICES
2425 FOUNTAINVIEW STE355
HOUSTON TX 77057

STAGE/ONE DAY SALE

DATE	TIME	RATE	SOURCE/SCRIPT	DATE	TIME	RATE	SOURCE/SCRIPT	DATE	TIME	RATE	SOURCE/SCRIPT
04/05	2:15p	16.75	801	04/05	3:15p	16.75	801	04/05	3:50p	16.75	801
04/05	4:50p	16.75	801	04/05	5:15p	16.75	801	04/05	6:15p	16.75	801
04/05	6:41p	16.75	801	04/05	6:50p	16.75	801	04/06	6:20a	16.75	801
04/06	7:10a	16.75	801	04/06	8:33a	16.75	801	04/06	9:41a	16.75	801
04/06	10:15a	16.75	801	04/06	10:50a	16.75	801	04/06	11:15a	16.75	801
04/06	11:50a	16.75	801	04/06	12:50p	16.75	801	04/06	1:41p	16.75	801
04/06	2:15p	16.75	801	04/06	2:50p	16.75	801	04/06	3:15p	16.75	801
04/06	4:15p	16.75	801	04/06	4:42p	16.75	801				

Gr= 385.25, Less 57.79 (15.00%) = 327.46, Annx= 23, Amt Due= 327.46

THE ABOVE ITEMS WERE BROADCAST WITHIN TEN MINUTES OF THE TIMES SPECIFIED ACCORDING TO OFFICIAL STATION LOGS.
AFFIDAVIT OF SERVICE RENDERED:

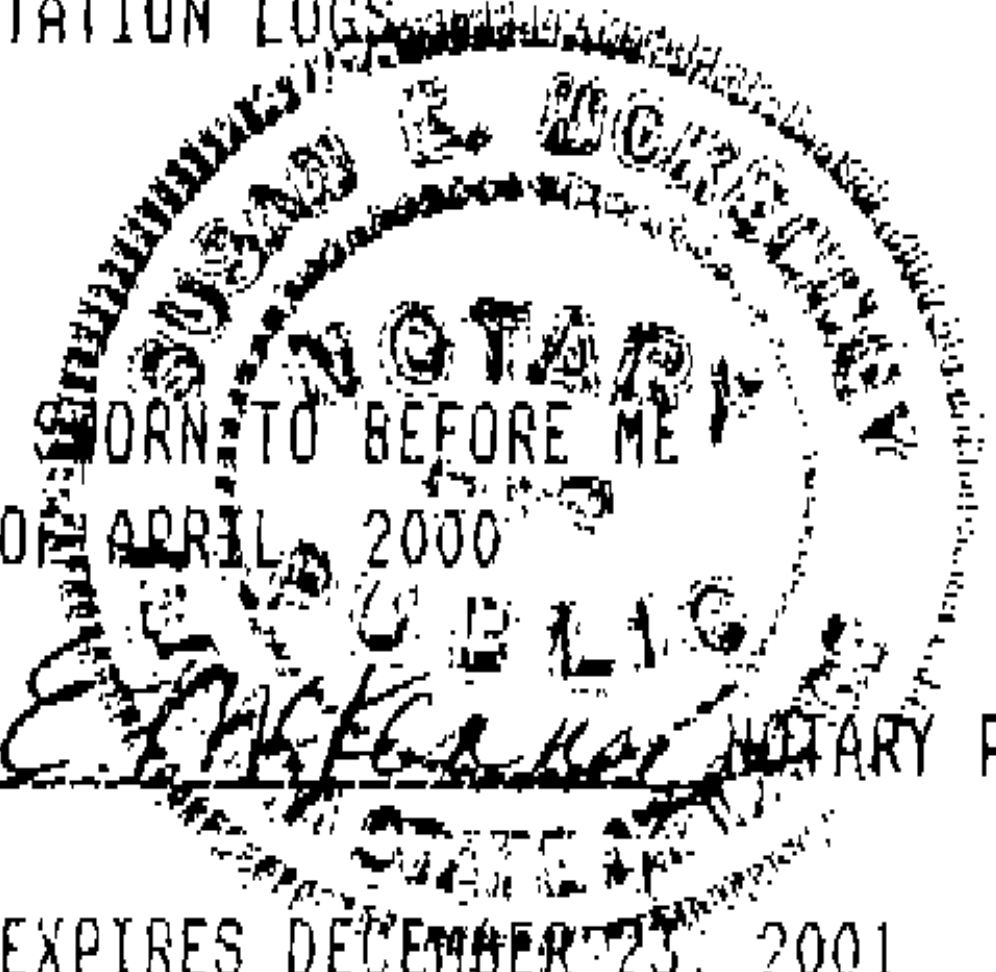
STATE OF ALABAMA, COUNTY OF MARSHALL
THE UNDERSIGNED, HAVING BEEN DULY SWORN, DEPOSES AND SAYS THAT
BROADCASTING SERVICE HAS BEEN RENDERED BY THIS STATION IN ACCOR-
DANCE WITH THE ABOVE INVOICE.

BY

Amelia Jones

SUBSCRIBED AND SWORN TO BEFORE ME
THIS 11th DAY OF APRIL, 2000

MY COMMISSION EXPIRES DECEMBER 23, 2001



WAFN
FUN MEDIA GROUP/WAFN-FM
P.O. BOX 4184
HUNTSVILLE, AL 35815-4184
256-586-9300

Date : 05/21/2000
Customer/Invoice: 18-013421
Order Number : 18012
Length : 60 3
Salesperson : SUSAN MCKENNEY

STAGE
REYNOLDS MEDIA SERVICES
2425 FOUNTAINVIEW, STE355
HOUSTON TX 77057

STAGE/ONE DAY SALE

DATE	TIME	RATE	SOURCE/SCRIPT	DATE	TIME	RATE	SOURCE/SCRIPT	DATE	TIME	RATE	SOURCE/SCRIPT
05/17	2:50p	16.75	801	05/17	3:50p	16.75	801	05/17	4:15p	16.75	801
05/17	5:42p	16.75	801	05/17	6:50p	16.75	801	05/18	6:34a	16.75	801
05/18	7:50a	16.75	801	05/18	9:41a	16.75	801	05/18	10:42a	16.75	801
05/18	10:50a	16.75	801	05/18	12:41p	16.75	801	05/18	1:50p	16.75	801
05/18	2:16p	16.75	801	05/18	3:50p	16.75	801	05/18	4:15p	16.75	801

Gr= 251.25, Less 37.69 (15.00%) = 213.56, Annx= 15, Amt Due= 213.56

THE ABOVE ITEMS WERE BROADCAST WITHIN TEN MINUTES OF THE TIMES SPECIFIED ACCORDING TO OFFICIAL STATION LOGS.
AFFIDAVIT OF SERVICE RENDERED:

STATE OF ALABAMA, COUNTY OF MARSHALL
THE UNDERSIGNED, HAVING BEEN DULY SWORN, DEPOSES AND SAYS THAT
BROADCASTING SERVICE HAS BEEN RENDERED BY THIS STATION IN ACCOR-
DANCE WITH THE ABOVE INVOICE.

BY

[Signature]

SUBSCRIBED AND SWORN TO BEFORE ME
THIS 21st DAY OF MAY, 2000

[Signature] NOTARY PUBLIC

MY COMMISSION EXPIRES DECEMBER 23, 2001

REYNOLDS MEDIA SERVICES

2425 FOUNTAINVIEW, STE. 355 HOUSTON, TX 77057 (713) 977-3778 FAX (713) 977-3774

RADIO ORDER FORM

Date: 1/24/2000
 To: Susan McKenney
 Station/City: WAFN-FM Arab, AL
 Fax: (256) 586-9301
 From: Stephanie Concialdi
 Re: Stage Stores, Inc. 2000 Buys 1/00 - 7/00

Attn Rep: Following are 6 radio buys for Stage Stores, Inc. Please use the same schedule for each flight date listed. Do not hesitate to call me with questions.

Events:	Flight Dates: (see exact times on schedule below)	Spot Length:
One Day Sale	We 2/9 (2pm start) - Th 2/10 (5pm cut-off)	:60
One Day Sale	We 3/8 (2pm start) - Th 3/9 (5pm cut-off)	:60
One Day Sale	We 4/5 (2pm start) - Th 4/6 (5pm cut-off)	:60
One Day Sale	We 5/17 (2pm start) - Th 5/18 (5pm cut-off)	:60
One Day Sale	We 6/7 (2pm start) - Th 6/8 (5pm cut-off)	:60
One Day Sale	We 7/19 (2pm start) - Th 7/20 (5pm cut-off)	:60

ONE DAY SALE (same schedule for each One Day Sale listed above)

TIMES	M	TU	W	TH	F	SA	SU	SPOTS	GROSS RATE
2P - 7P			5					5	16.75
6A - 5P				10				10	16.75
Total			5	10				15	\$ 251.25

Total Gross Amount for all Flights: \$1,507.50

Total Net Amount for all Flights: \$1,281.38

Please acknowledge receipt of the above orders by signing and faxing back to (713) 977-3774.

Rep Signature

Susan E. McKenney

Date 1-24-00

- ① All invoices must have spot times listed.
- ② All invoices should be sent to Stage Stores, Inc. c/o Reynolds Media Services 2425 Fountainview, Suite 355 Houston, TX 77057.
- ③ Stage Stores, Inc. is responsible for payment of all Stage/Bealls/Palais Royal invoices. All invoices are approved by Reynolds Media Services and sent to Stage Stores, Inc. for payment.

REYNOLDS MEDIA SERVICES

2425 FOUNTAINVIEW, STE. 355 HOUSTON, TX 77057 (713) 977-3778 FAX (713) 977-3774

RADIO ORDER FORM

Date: 3/21/2000
 To: Susan McKenney
 Station/City: WAFN-FM Arab, AL
 Fax: (256) 586-9301
 From: Stephanie Concialdi
 Re: Stage Stores, Inc. Additional Advertising - April One Day Sale

Attn Rep: We are increasing our radio advertising in several markets for the April One Day Sale. Please add the following spots to your existing order for April. Do not hesitate to call me with questions.

ONE DAY SALE We 4/5 (2pm start) - Th 4/6 (5pm cut-off)

TIMES	4/3 M	4/4 TU	4/5 W	4/6 TH	4/7 F	4/8 SA	4/9 SU	SPOTS	GROSS RATE
2P - 7P			3					3	16.75
6A - 5P				5				5	16.75
Total			3	5				8	

Total Gross Amount Added to Flight: \$ 134.⁰⁰

Total Net Amount Added to Flight: \$ 113.⁹⁰

Please acknowledge receipt of the above order by signing and faxing back to (713) 977-3774.

Rep Signature

Susan E. McKenney

Date 3/21/2000

- ① All invoices must have spot times listed.
- ② All invoices should be sent to Stage Stores, Inc. c/o Reynolds Media Services 2425 Fountainview, Suite 355 Houston, TX 77057.
- ③ Stage Stores, Inc. is responsible for payment of all Stage/Bealls/Palais Royal Invoices. All Invoices are approved by Reynolds Media Services and sent to Stage Stores, Inc. for payment.